ARIZONA FORM 140 IA

Individual Income Tax Installment Agreement Request

Enter your name(s) and social security number(s) as listed on Arizona Form 140, 140A, 140EZ, 140PY, or 140NR		
First name and initial - if joint return, also give spouse's name and initial	Last name	Your social security number
		Spouse's social security number
Home telephone number		
Home telephone number		
Present home address - number and street, including apartment number or rural route		
Tresent notice address. Trainber and street, including apartitent number of furarroate.		
City, town, or post office State	;	ZIP code
	T	
Your place of employment	Spouse's place of employment	
Your business telephone number	Spouse's business telephone numbe	r
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Banking institution	This request is for tax year(s)	
Proposed monthly payment amount	Proposed monthly payment due date	
repease mentally payment amount	(1st thru 28th)	
Your signature	Date	
Spouse's signature (if applicable)	Date	
Spouse 3 signature (ii applicable)	Duic	

INSTRUCTIONS

If you cannot pay the entire amount of income tax due, you may ask to make payments. To make this request, complete this form and attach it to the front of your tax return when you file.

If you file a joint return, the department requires information for both you and your spouse. Make sure you specify the amount of monthly payment that you propose to make.

If you have more than one employer, attach a statement with the additional information.

Pay as much as you can with your return to lower penalty and interest charges. The department charges interest from the original due date to the date of payment. The Arizona rate of interest is the same as the federal rate.

Make your check or money order payable to the Arizona Department of Revenue. Be sure to put your name, address, and social security number on your payment. Also include any special instructions you may have.

If you have any questions about making payment arrangements, call the department. In Phoenix, you can call (602) 542-5551. In Tucson you can call (520) 628-6442.

Remember, attach this form to the **FRONT** of your return. The department will contact you within 60 days. The department will let you know if the department approves or denies your request. The department will also let you know if the department needs more information.